							-Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 29, 1999												
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA	LLEN	ПΥ	OR	OTHER		
FC	)R	<del></del>	NUMBER FILED NUMBER			RATE		FEE		RATE	FEE	
BA	SIC FEE					74.41	3	45.00	OR	7.75	690.00	
ТО	TAL CLAIMS	145	44 minus 20= · 28			X\$ 9	=	4	OR	X\$18=	504	
IND	EPENDENT CLAIM	is (	f minus :	3= !		X39	=		OR	X78=	78	
ΜŲ	LTIPLE DEPENDE	NT CLAIM PE	RESENT			+130			ÖR	+260=		
- 11	the difference in o	olumn 1 is i	ess than ze	ro, enter "0" in c	olumn 2	TOTA	_		OR		1272	
I	AM 13 CLAIMS AS AMENDED - PART II						<u> </u>			OTHER		
		Column 1)		(Column 2)	(Column 2) (Column 3)		SMALL ENTITY		OR	SMALL		
ENT A		CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E TI	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	47	Minus	48	• 9	X\$ 9	=	\	OR	X\$18=	/	
AMENDMENT	Independent -	6:-	Minus	9	- (7)	X39	<b>-</b> ,		OR	X78=		
	FIRST PRESENTA	ATION OF MR	JETIPLE DEP	ENDENT CLAIM	7	+130	- /		OR	4260=		
				477		TO	TAL		OR	TOTAL ADDIT. FEE		
	(	Column 1)	•	(Column 2)	(Ĉolumn 3)	<b>ADD</b> 11, 0				1		
ENT B		CLAIMS REMAINING AFTER MENDMENT		HIGHEST — NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ë TI	DDI- ONAL FEE	1171	RATE	ADDI- TIONAL FEE	
NO.	Total -		Minus	60	-	X\$ 9	=		OR	X\$18=		
AMENDMENT	Independent •	· ·	Minus	***	-	`X39	-		ОЯ	X78=		
	FIRST PRESENT	ATION OF MI	JETIPLE DEF	ENDEN! CLAIM		+130	)=		OR	+260=		
	·		. ••			- TO	YAL	•	ОЯ	. YOTAL ADDIT, FEE		
		Column 1)		(Column 2)	(Column 3)	ADUH. I	- E G. <b>1</b>	<del>- 17,</del>		AUDIT. FCE		
ENTC		CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E n	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total -		Minus	••	-	X\$ 9			OR	X\$18=		
ME	independent •		Minus	***	=	X39	_			X78-		
K	FIRST PRESENT	ATION OF M	ULTIPLE DE	PENDENT CLAIM					OR		<del></del>	
	if the entry in column	t le loco than t	a ssiru in saki	mn 2 write 10° in co	kımın 3.	+130	_1_		OR	+260≈		
-	If the "Highest Number	r Previously Pa	aid For IN THI	S SPACE is less the	in 20, enter "20."	AODIT.	TAL		OR	ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 12/99)